

Application Data Sheet

Application Information

Application type::	Regular
Subject matter::	Utility
CD-ROM or CD-R::	None
Number of CD disks::	0
Number of copies of CDs::	0
Sequence submission?::	No
Computer readable form (CRF)?::	No
Number of copies of CRF::	0
Title::	WOUND DRESSING
Attorney docket number::	SIGU3012/JEK/JJC
Request for early publication?::	No
Request for non-publication?::	No
Suggested drawing figure::	
Total drawing sheets::	10
Small entity?::	No

Applicant Information

Applicant authority type::	Inventor
Primary citizenship country::	Iceland
Status:	Full capacity
Given name::	Gudmundur
Middle name::	Fertram
Family name::	Sigurjonsson
Name suffix::	
City of Residence::	Reykjavik
State or province of residence::	
Country of residence::	Iceland
Street of mailing address::	Bergstadastraeti 62

City of mailing address:: Reykjavik

State or province of mailing address::

Country of mailing address:: Iceland

Postal or zip code of mailing address:: 101

#### Applicant Information

Applicant authority type:: Inventor

Primary citizenship country:: Iceland

Status: Full capacity

Given name:: Thordur

Middle name:: M.

Family name:: Elefsen

Name suffix::

City of Residence:: Mosfellsbaer

State or province of residence::

Country of residence:: Iceland

Street of mailing address:: Klapparhlid 30, Suite 304

City of mailing address:: Mosfellsbaer

State or province of mailing address::

Country of mailing address:: Iceland

Postal or zip code of mailing address:: 270

#### Applicant Information

Applicant authority type:: Inventor

Primary citizenship country:: Iceland

Status: Full capacity

Given name:: Palmar

Middle name:: I.

Family name:: Gudnason

Name suffix::

City of Residence:: Reykjavik  
 State or province of residence::  
 Country of residence:: Iceland  
 Street of mailing address:: Gydufell 4  
 City of mailing address:: Reykjavik  
 State or province of mailing address::  
 Country of mailing address:: Iceland  
 Postal or zip code of mailing address:: 111

#### Correspondence Information

Correspondence customer number:: 23364  
 Phone number:: 703-683-0500  
 Fax number:: 703-683-1080  
 E-mail address:: mail@baconthomas.com

#### Representative Information

Representative customer number:: 23364

#### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	an application claiming benefit under 35 USC 119(e)	60/437,146 60/482,775 60/503,546 60/518,317	12/31/02 06/27/03 09/17/03 11/10/03
This application	National stage of		
This application	Continuation of		

#### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority claimed::

#### Assignee Information

Assignee name::